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## PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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7590

08/17/2004

Kate H Murashige  
Morrison & Foerster  
Suite 500  
3811 Valley Centre Drive  
San Diego, CA 92130-2332

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Rebecca McElroy (Depositor's name)  
*[Signature]* (Signature)  
November 17, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/743,561	08/13/2001	Gary James Bridger	391442001122	4067

TITLE OF INVENTION: METHODS TO MODULATE CONDITIONS MEDIATED BY THE CXCR4 RECEPTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO YES	\$685	\$0	\$685	11/17/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
COLEMAN, BRENDA LIBBY	1624	514-183000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AnorMed Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Langley, B.C.  
Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

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- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 10

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- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1932 (enclose an extra copy of this form).

5. Change in Entry Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature)

(Date)

Emily C. Tongco - Reg.No.46,473

November 17, 2004

*[Signature]*

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**MORRISON & FOERSTER LLP**

Attorneys at Law  
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Telephone: (858) 720-5100  
Facsimile: (858) 720-5125

**To: U.S. Patent and Trademark Office**  
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**From: Emily C. Tongco, Reg. No. 46,473**

**Date: November 17, 2004**

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**Comments:**

Attorney Docket: 391442001122  
Group Art Unit: 1624  
Confirmation No.: 4067  
Examiner: B. Coleman  
Serial No.: 09/743,561  
Filing Date: August 13, 2001  
Inventor(s): Gary J. BRIDGER et al.  
Title: METHODS TO MODULATE CONDITIONS MEDIATED BY THE CXCR4 RECEPTOR

**Papers attached:**

1. Issue Fee Transmittal, Form PTOL-85 (1 page + duplicate)

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